

It is impossible to condense an exhaustive study of histology or pathology into a manual of microscopy. The latter, however, cannot be used to advantage without the aid of a book upon the former containing numerous well-drawn illustrations. Such a work enables the student to compare his own preparations with those of others. Recent works of this character are not wanting, however, and will be of all the more use to those who follow Friedländer's instructions.

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**Sleep-Walking and Hypnotism.** By D. HACK TUKE, M.D., LL.D. P. Blakiston, Son, & Co., Philadelphia, 1884. Pp. 119.

Several essays are included in this volume. The first, on "Sleep-Walking," was read before the British Medical Association a year ago. This contains little that is new. The writer does not claim novelty in his work, and announces that the primary object is to draw renewed attention to sleep-walking. To further this end he publishes a list of questions to which he solicits answers. He adds no cases in the few he cites which present essentially new features. Among these he gives the following, with the accompanying remarks :

"One of the most remarkable among the deeds performed by sleep-walkers communicated to me occurred in the person of a mental physician when holding the post of assistant medical officer in a large asylum, and attested by the exceptional evidence of another physician. It is a splendid instance of unconscious reflex action of the brain—the train of events originating entirely from without. On one occasion, when making his usual morning visit in a detached ward occupied by more excited patients, he was about to leave when the nurse said :

"' You have n't seen the new patient, sir.'

"' What new patient ? ' said Dr. Blank.

"' The patient you brought over during the night, sir.'

"' I brought no patient over during the night,' was the reply.

"' Dr. Blank,' said the amazed nurse, ' I 'll let you see the woman,' whereupon she opened the door of a room and showed him a maniacal patient.

"The fact was that Dr. Blank had been roused from bed, had dressed, and had gone down stairs and examined the admission papers. He had received the patient, and as she was much excited, had gone out of doors to this detached room for her ; yet in the morning all this was utterly forgotten. Nothing but seeing the patient then would convince the doctor that the event had occurred, and even seeing her did not recall the very faintest recollection of her admission.

"It does not appear that he had made any entry of the admission in a book, but, of course, he must have conversed with those who brought the patient to the asylum."

Dr. Tuke calls this a "very striking example of mental operations *performed in sleep*, and entire absence of recollection of them

next day." He adduces no evidence to show that these operations were performed in sleep. He distinctly states that the man was roused up in the night to receive the patient. There is nothing to prove that this might not be an instance in which actions performed in waking moments between periods of sound sleep are entirely forgotten. We can recall one of such a nature, though not so striking as the anecdote related above. A young lady was waked out of a sound sleep to see a total eclipse of the moon. She sat up in bed, looked at it, made some remarks with reference to it. In the morning she could not recall any thing in connection with the events of the preceding night, or that she had seen the moon at all.

In the essay on "The Mental Condition in Hypnotism," he brings together very much that is interesting. He touches slightly on the injurious effects of hypnotism upon the subject. It is to be regretted that this matter, which is an exceedingly practical one, has not received more attention, either at the hands of the author or others.

He sums up the chief points relative to the mental conditions present in hypnotism as follows:

1. There may be consciousness during the state of hypnotism, and it may pass rapidly or slowly into complete unconsciousness, as in the somnambulistic state; the manifestations not being dependent upon the presence or absence of consciousness, which is merely an epiphenomenon.

2. Voluntary control over thought and action is suspended.

3. The reflex action, therefore, of the cerebral cortex to suggestions from without, so long as any chance of communication is open, comes into play.

4. While consciousness is retained, the perception of reflex or automatic cerebral action conveys the impression that there are two egos.

5. Some of the mental functions, as memory and imagination, may be exalted, and there may be vivid hallucinations and delusions which may persist after waking.

6. Unconscious reflex mimicry may be the only mental phenomenon present, the subject copying minutely every thing said or done by the person with whom he is *en rapport*.

7. Impressions from without may be blocked at different points in the encephalon according to the areas affected and the completeness with which they are hypnotized; these are impressive or suggestive whether by gesture or word or muscular stimulus, may take the round of the basal ganglion only, or may pass to the cortex, and having reached the cortex, may excite reaction and reflex muscular action with or without consciousness, and wholly independent of the will.

8. There may be in different states of hypnotism, the opposite conditions of exaltation and depression of sensation and the special senses.

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